
510 (k) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

The assigned 510(k) number is: **K983053**

Applicant information:

Date Prepared:	August 28, 1998
Name:	Alden Optical Laboratories
Address:	13295 Broadway Alden, New York 14004
Contact Person:	Charles H. Creighton
Phone Number:	800.253.3669
USA Consultant:	MedVice Consulting, Inc.
Phone Number:	Martin Dalsing (970) 243-5490

Device Information:

Device Classification:	Class II
Classification Number:	LPL
Trade Name:	ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens (lathe-cut).
Classification Name:	Lenses, Soft Contact, Daily Wear

Substantially Equivalent Devices:

The ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens is substantially equivalent to the "WESLEY-JESSEN PROSTHETIC" (phemfilcon A) Soft Contact Lens and the BENZ -38 (polymacon) Soft Contact Lens, the predicate devices.

Device Descriptive Characteristics:

The ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens is fabricated from polymacon, which in the dry (unhydrated) state may be machined and polished. The hydrophilic nature of this material allows the lens to become soft and pliable when immersed in an aqueous solution. A tint mixture containing; *Blue* 7,16-Dichloro-6, 15-dihydro-5,9,14,18-anthrazinetetrone, *Green* 16,17 - Dimethoxydinaphtho [1,2,3 -cd:3',2',1' -lm] perylene-5,10-dione, and *Brown* 16,23 - Dihydrodinaphtho [2,3-a:2',3' -i] naphth [2',3';:6,7] indolo [2,3-c] carbazole-5,10,15,17,22,24-hexone is added to the lens.

The tint mixture (BLACK) is processed into the contact lens to enhance or alter the apparent eye color, including ocular masking, either in sighted or non-sighted eyes that require a prosthetic contact lenses for cosmetic management of conditions such as corneal, iris or lens abnormalities. The lens may also be prescribed for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons or for occlusive therapy for conditions such as diplopia, amblyopia or extreme photophobia.

Tint Patterns Available:

1. **Clear lens with Black Pupil.** Pupil sizes available in 2.0 mm to 12.5 mm.
2. **Black Occluder Lens.** A Central Black area that occludes light. Available to full lens diameter in 0.5 mm increments.
3. **Black Annular with clear pupil.** Black Annular diameter range 7.5 mm to full lens diameter in 0.5 mm increments. Clear Pupil diameter range 2.0 mm to 7.5 mm in 0.5 mm increments.
4. **Tinted lens with Black Pupil.** Uses the Alden Classic Tinted (polymacon 38%) contact lens with black pupil. Pupil sizes available in 2.0 mm to 12.5 mm diameter.

In the hydrated state, the lens conforms to the curvature of the eye covering the cornea and extending slightly beyond the limbus forming a color altering optical surface. The (polymacon) soft hydrophilic contact lens has a spherical back surface. The hydrophilic properties of the lens require that it be maintained in a fully hydrated state in a solution compatible with the eye. If the lens dries out, it will become hard and appear somewhat warped; however, it will return to its proper configuration when completely rehydrated in the proper storage solution.

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The hydrophilic characteristics allow aqueous solutions to enter the lens and in its fully hydrated state the lens is approximately 38% water by weight. The physical properties of the lens are:

Refractive Index	1.52 (dry) 1.43 (hydrated)
Light Transmission:	greater than 70% T
Water Content	38 %
Specific Gravity	1.28 (dry) 1.18 (hydrated)
Color additives	Vat Brown 1, Vat Blue 6, Vat Green 1
Oxygen Permeability	9×10^{-11} Fatt Units (cm^2/sec)(ml O ₂ /ml x mm Hg @ 35° C), (revised Fatt method)

Intended Use:

The **ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens** is indicated for daily wear to enhance or alter the apparent eye color, including ocular masking, either in sighted or non-sighted eyes that require a prosthetic contact lenses for cosmetic management of conditions such as corneal, iris or lens abnormalities. The lens may also be prescribed for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons or for occlusive therapy for conditions such as diplopia, amblyopia or extreme photophobia. The lens may be disinfected with either a chemical or a heat disinfection system.

Substantial Equivalence:

The device will be manufactured according to specified process controls and a quality assurance program. The device will undergo manufacturing, packaging and sterilization procedures similar to devices currently marketed and distributed by Alden Optical Laboratories. The established safety profile (pre-clinical toxicology and manufacturing/chemistry data) of the device is equivalent to the Alden Classic, and Alden Classic Tinted (polymacon), 510(k)'s #K973967 and #K980554. Being similar with respect to materials, physical construction and safety & effectiveness to the predicate device, this meets the requirements per section 510(k) of the act regarding substantial equivalence and does not raise different questions of safety and effectiveness than the predicate devices identified above.

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The following matrix illustrates the production methods, lens functions and material characteristics of the ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens as well as the predicate device.

Substantial Equivalence Matrix

	Characteristic	ALDEN CLASSIC PROSTHETIC	WESLEY-JESSEN PROSTHETIC
1.)	PRODUCTION METHOD	Lathe-Cut	Lathe-Cut
2.)	LENS FUNCTION	Enhance or alter the apparent eye color, including ocular masking, either in sighted or non-sighted eyes that require a prosthetic contact lenses for cosmetic management of conditions such as corneal, iris or lens abnormalities. The lens may also be prescribed for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons or for occlusive therapy for conditions such as diplopia, amblyopia or extreme photophobia.	Enhance or alter the apparent eye color, including ocular masking, either in sighted or non-sighted eyes that require a prosthetic contact lenses for cosmetic management of conditions such as corneal, iris or lens abnormalities. The lens may also be prescribed for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons or for occlusive therapy for conditions such as diplopia, amblyopia or extreme photophobia.
3.)	MATERIAL	Hydrophilic Polymer	Hydrophilic Polymer
a.	Polymer	Polymacon	phemfilcon A
b.	Water Content	38%	38%
c.	Polymer Content	62%	62%
d.	DK Value	9	12.9
e.	Refractive Index	1.43 (hydrated)	1.440 (hydrated)
f.	Specific Gravity	1.18 (hydrated)	1.17 (hydrated)
g.	Light Transmission	Varies depending on prosthetic lens design	Varies depending on prosthetic lens design
h.	Color Additives	Vat Green 1, Vat Brown 1, Vat Blue 6,	Iron oxides, chromium oxide greens, titanium dioxide, [phthalocyaninato (2)] copper, carbazole violet and phthalocyanine green.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

OCT 21 1998

Alden Optical Laboratories, Inc.
c/o Mr. Martin Dalsing
623 Glacier Drive
Grand Junction, CO 81503

Re: K983053

Trade Name: ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Daily Wear
Contact Lens (lathe-cut)

Regulatory Class: II

Product Code: 86 LPL

Dated: August 28, 1998

Received: September 1, 1998

Dear Mr. Dalsing:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic (QS) inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4613. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsmamain.html>".

Sincerely yours,

A handwritten signature in cursive script that reads "A. Ralph Rosenthal".

A. Ralph Rosenthal, M.D.

Director

Division of Ophthalmic Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

INDICATIONS FOR USE STATEMENT

Device Name: **ALDEN CLASSIC PROSTHETIC (polymacon) Tinted,
Soft Contact Lens (Lathe-cut).**

INDICATIONS FOR USE:

The **ALDEN CLASSIC PROSTHETIC (polymacon) Tinted, Soft Contact Lens (Lathe-cut)** is indicated for daily wear to enhance or alter the apparent eye color, including ocular masking, either in sighted or non-sighted eyes that require a prosthetic contact lenses for cosmetic management of conditions such as corneal, iris or lens abnormalities. The lens may also be prescribed for the correction of refractive ametropia (myopia, hyperopia and astigmatism) in aphakic and not aphakic persons or for occlusive therapy for conditions such as diplopia, amblyopia or extreme photophobia. The lens may be disinfected with either a chemical or a heat disinfection system.

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Michael W. C. Brown, PhD
(Division Sign-Off)

Division of Ophthalmic Devices

510(k) Number K983053

Prescription Use X
(Per 21 CFR 801.109)

or

Over-The-Counter Use

(Optional Format 1-2-96)